

WHCOA Topic Area: Health and Long Term Living
Issue: Mental Health, Dementias and Substance Abuse

Overview of Current Issue Status: A substantial number of older adults experience mental health disorders or problems for the first time late in life and under-utilize mental health services. These mental disorders can range from problematic to disabling to fatal. In fact, the rate of suicide among older adults is higher than that for any other age group and the suicide rate for persons 85 years and older is the highest of all, twice the overall national rate. Finally, the wide misperception that mental disorders like depression and dementias are a normal part of growing older perpetuates stigma and creates barriers to seeking treatment.

Challenges: Nearly 20% of people age 55 and older experience mental disorders and 65% of seniors who commit suicide have visited their primary care physician within 30 days. Further, the population of seniors 65+ is the fastest-growing substance abuse segment in the country. A fragmented system of care, inadequate funding, lack of coordination and collaboration among primary care, mental health, and aging services providers, staff shortages exacerbated by lack of training in geriatric mental health, and continued stigma, conspire to impede the provision of crucial mental health services.

Resolution:

Increase collaboration among behavioral health services providers and streamline federal, state and privately financed behavioral health services to coordinate and strengthen existing service and delivery systems.

Promote prevention and early intervention measures that increase collaboration among acute and long-term care providers.

Provide incentives for recruitment and training of a diverse group of geriatric behavioral health professionals and paraprofessionals within the fields of medicine, behavioral health, and social services.

Increase public awareness to reduce the stigma surrounding mental illnesses, dementias and substance abuse.

Increase behavioral health and aging research to improve understanding of the biological, behavioral, social, and cultural factors related to mental illness, especially for at-risk and underserved populations.

Encourage greater consumer advocacy and involvement in issues of access, range, and quality of behavioral health services.

Ensure that behavioral health professionals acquire adequate knowledge of the cultural background and values of the ethnic and cultural minorities they serve, enabling them to tailor their service approaches to the consumer.

Ensure comprehensive parity requirements that would require group health plans to treat behavioral health benefits the same as medical and surgical benefits.

Provide annual depression screening and waive deductibles and coinsurance for depression screening under the Medicare program.

Initiate demonstration grants under the US Administration on Aging to foster behavioral health screening and treatment services to the aging population including suicide intervention, prevention, and depression screenings.